

Date Sent: 2024-06-17 17:04:34
From: LASPD info@mylegaladvocates.org
To: Source Receivables Management LLC / Source RM
info@sourcerm.com
CC:
Subject: ID 12832, George Dean [REDACTED]
[Click to download or view](#)
Attachments: [12832_POA-Only.pdf](#)

LASPD®

180 North Michigan Avenue, Suite 908, Chicago, IL 60601

VIA EMAIL

June 17, 2024

Source Receivables Management LLC / Source RM
4615 Dundas Drive, Suite 102
Greensboro, NC 27407-1613

Re: George Dean
[REDACTED]
[REDACTED] GA [REDACTED]

Consumer's account: [REDACTED] / T-Mobile

Consumer's SSN: [REDACTED]

LASPD file number: [REDACTED]

Dear Sir or Madam:

Please be advised that we represent George Dean regarding your firm's collection activities.

Legal Advocates for Seniors and People with Disabilities (LASPD) is a nationwide program that provides debt-related legal services to seniors and people with disabilities. These individuals receive a fixed and/or limited income, protected by Federal laws, and LASPD advises them of their rights under these laws. Our goal is to persuade creditors and third party collectors to cease collection efforts, including filing a lawsuit, regarding debts such as the one referenced above.

We ask that you, or the creditor you represent, review the attached affidavit from Mr. Dean . Our client 's income is protected from levy, attachment or garnishment by Federal law. Moreover, there is no income available for any payment arrangement or settlement. Accordingly, our client cannot pay the debt(s) that you are attempting to collect and we ask



that you cease all further communications or collection actions. Our client also questions the correctness of the debt(s) you are trying to collect.

In closing, I am prepared to furnish you with other appropriate information you may require. If you have any questions, please contact LASPD at 312-263-1633 or info@mylegaladvocates.org.

Very truly yours,

A handwritten signature in black ink, appearing to read "Donald Leibsker".

Donald Leibsker
Legal Director

Enc.

Legal Advocates for Seniors and People with Disabilities®
Website: www.mylegaladvocates.org E-Mail: info@mylegaladvocates.org
Phone: 312-263-1633 Fax: 312-263-1637

Income and Expense Report

Type	Category	Description	Amount
Income	Social Security Disability		
Income	Public Aid		
Expense	Utilities		
Expense	Rent/Mortgage		
Expense	Medical		
Expense	Health Insurance		
Expense	Gas/Maintenance		
Expense	Food		
Expense	Dental		
Expense	Car Payment(s)		
Expense	Car Insurance		

CONSENT FORM FOR LEGAL REPRESENTATION

Please allow this form to express my (our) formal consent for Legal Advocates for Seniors and People with Disabilities (LASPD) to act as my (our) agent and to provide limited legal representation on my (our) behalf with respect to my (our) debts. LASPD has authority to communicate and act on my (our) behalf with all creditors and debt collectors. All communication regarding my (our) debts from any and all of my (our) creditors and debt collectors shall be made only through my (our) agent, LASPD. This consent form shall be valid until revoked in writing by the undersigned.

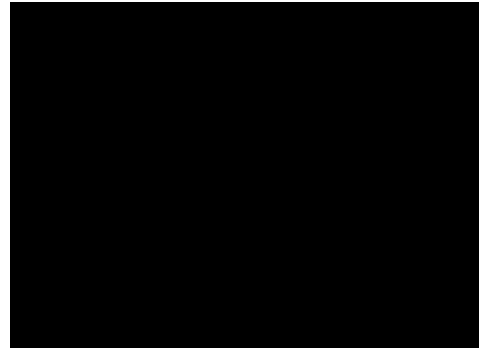
George Bradley Dean

FIRST CLIENT'S NAME

George Bradley Dean
FIRST CLIENT'S SIGNATURE

09/21/2023

DATE SIGNED



Please include a COPY of just ONE of the following SIGNED documents:

1. Driver's License OR
2. State I.D. Card OR
3. Social Security Card

REMEMBER – YOU JUST NEED TO INCLUDE ONE OF THE ABOVE.